

**OFFICIAL FILE**  
**ILLINOIS COMMERCE COMMISSION**  
**FORMAL COMPLAINT**

Illinois Commerce Commission  
527 E. Capitol Avenue  
Springfield, Illinois 62701

For Commission Use Only:

Case: 04-0717

**ORIGINAL**

Regarding a complaint by (Person making the complaint): Apps Communications, Inc.

Against (Utility name): Globalcom, Inc.

As to (Reason for complaint) Provision by Globalcom of incorrect and unsupported router configuration which led to service disruptions and thereafter insistence by Globalcom that unearned charges be paid as a condition to avoidance of service shut offs.

in \_\_\_\_\_ Illinois.

**TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:**

My mailing address is 10470 West 164th Place, Orland Park 60467

The service address that I am complaining about is Multiple Customer locations

My home telephone is [ ]

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [ 708 ] 403-9200

(Full name of utility company) Globalcom, Inc. (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.

Please see attached sheet.

Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?

☒ Yes ☐ No

Has your complaint filed with that office been closed?

☐ Yes ☐ No

CHIEF CLERK'S OFFICE  
2004 NOV 22 11:01  
ILLINOIS COMMERCE COMMISSION

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

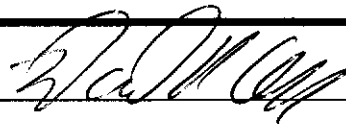
Please see attached sheet.

Please clearly state what you want the Commission to do in this case:

Please see attached sheet.

Date: October 25, 2004  
(Month, day, year)

Complainant's Signature



If an attorney will represent you, please give the attorney's name, address, and telephone number.

Barry C. Kessler, 318 West Randolph Street, 5th Floor, Chicago, IL  
Telephone: 312-419-0545 60606

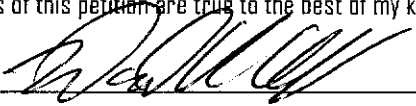
You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).

#### VERIFICATION

A notary public must witness the completion of this part of the form.

I, David Apps, first being duly sworn, say that I have read the above petition and know what it says.  
The contents of this petition are true to the best of my knowledge.

(Signature)



Subscribed and sworn/affirmed to before me on (month, day, year) NOVEMBER 4, 2004

Jennifer L. Brabec  
Notary Public, Illinois



**NOTE:** Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.